



PATENT  
802220-0022US

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of: BELLIARD et al.

GAU: Unknown

Appln. No.: 10/735,603

Examiner: Unknown

Filed: December 12, 2003

Conf. No.: 1725

For: Intervertebral Disk Prosthesis

**LETTER SUBMITTING REPLACEMENT DRAWING SHEET(S)**

United States Patent & Trademark Office  
2011 South Clark Place  
Customer Window, MS Non-Fee Amendment  
Crystal Plaza Two, Lobby, Room 1B03  
Arlington, VA 22202

Dear Sir:

In response to the indication of missing items in the Notice to File Missing Parts dated March 25, 2004 and in connection with the Preliminary Amendment being filed concurrently, one (1) replacement drawing sheet is submitted herewith.

In the replacement sheet the subject matter originally labeled "FIG. 3A" has been broken into one part labeled "FIG. 3A" and another part "FIG.4A"; and the subject matter originally labeled "FIG. 4A" is now labeled "FIG. 4C".

Respectfully submitted,

**CABINET BEAU DE LOMENIE**

By



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Date: 5-21-2004



MAY 21 2004

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PTO/SB/17 (10-03)

Approved for use through 07/31/2006. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

# FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	(\$0)
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**Complete if Known**

Application Number	10/735,603
Filing Date	12/12/2003
First Named Inventor	BELLIARD et al.
Examiner Name	Unknown
Art Unit	Unknown
Attorney Docket No.	802220-0022US

**METHOD OF PAYMENT (check all that apply)**

Check  Credit card  Money Order  Other  None

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**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1001 770	2001 385			Utility filing fee	
1002 340	2002 170			Design filing fee	
1003 530	2003 265			Plant filing fee	
1004 770	2004 385			Reissue filing fee	
1005 160	2005 80			Provisional filing fee	

**SUBTOTAL (1) (\$0)**

**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

Total Claims	Independent Claims	Multiple Dependent	Extra Claims	Fee from below	Fee Paid
			-20** =	X	=
			- 3** =	X	=

Large Entity	Small Entity	Fee Description
1202 18	2202 9	Claims in excess of 20
1201 86	2201 43	Independent claims in excess of 3
1203 290	2203 145	Multiple dependent claim, if not paid
1204 86	2204 43	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2) (\$0)**

\*\*or number previously paid, if greater; For Reissues, see above

**FEE CALCULATION (continued)****3. ADDITIONAL FEES****Large Entity****Small Entity**

Fee Code (\$)	Fee (\$)	Fee Code (\$)	Fee (\$)	Fee Description	Fee Paid
1051 130	2051 65			Surcharge - late filing fee or oath	
1052 50	2052 25			Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130			Non-English specification	
1812 2,520	1812 2,520			For filing a request for ex parte reexamination	
1804 920*	1804 920*			Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*			Requesting publication of SIR after Examiner action	
1251 110	2251 55			Extension for reply within first month	
1252 420	2252 210			Extension for reply within second month	
1253 950	2253 475			Extension for reply within third month	
1254 1,480	2254 740			Extension for reply within fourth month	
1255 2,010	2255 1,005			Extension for reply within fifth month	
1401 330	2401 165			Notice of Appeal	
1402 330	2402 165			Filing a brief in support of an appeal	
1403 290	2403 145			Request for oral hearing	
1451 1,510	1451 1,510			Petition to institute a public use proceeding	
1452 110	2452 55			Petition to revive - unavoidable	
1453 1,330	2453 665			Petition to revive - unintentional	
1501 1,330	2501 665			Utility issue fee (or reissue)	
1502 480	2502 240			Design issue fee	
1503 640	2503 320			Plant issue fee	
1460 130	1460 130			Petitions to the Commissioner	
1807 50	1807 50			Processing fee under 37 CFR 1.17(q)	
1806 180	1806 180			Submission of Information Disclosure Stmt	
8021 40	8021 40			Recording each patent assignment per property (times number of properties)	
1809 770	2809 385			Filing a submission after final rejection (37 CFR 1.129(a))	
1810 770	2810 385			For each additional invention to be examined (37 CFR 1.129(b))	
1801 770	2801 385			Request for Continued Examination (RCE)	
1802 900	1802 900			Request for expedited examination of a design application	

Other fee (specify) \_\_\_\_\_

\*Reduced by Basic Filing Fee Paid

**SUBTOTAL (3) (\$0)**

(Complete if applicable)

**SUBMITTED BY**

Name (Print/Type)	Mike S. RYU	Registration No. (Attorney/Agent)	38,604	Telephone	33144188900
Signature			Date		

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MAY 21 2004

PTO/SB/21 (02-04)

Approved for use through 07/31/2006, OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

## **TRANSMITTAL FORM**

*(to be used for all correspondence after initial filing)*

<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/735,603	
	Filing Date	12/12/2003	
	First Named Inventor	BELLIARD et al.	
	Art Unit	Unknown	
	Examiner Name	Unknown	
Total Number of Pages in This Submission	8	Attorney Docket Number	802220-0022US

**ENCLOSURES**      *(Check all that apply)*

- |  |   |  |
|--|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form                     | <input checked="" type="checkbox"/> Drawing(s)                            | <input type="checkbox"/> After Allowance communication to Technology Center (TC)   |
| <input type="checkbox"/> Fee Attached  | <input type="checkbox"/> Licensing-related Papers                         | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences                                      |
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| <input type="checkbox"/> After Final   | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Proprietary Information   |
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| <input type="checkbox"/> Extension of Time Request                           | <input type="checkbox"/> Change of Correspondence Address                 | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br>Letter submitting replacement drawing |
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| <input type="checkbox"/> Information Disclosure Statement                    | <input type="checkbox"/> Request for Refund                               |  |
| <input type="checkbox"/> Certified Copy of Priority Document(s)              | <input type="checkbox"/> CD, Number of CD(s) _____                        |  |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application   | <b>Remarks</b>  |  |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 |   |  |

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	Cabinet Beau de Loménie
Signature	
Date	May 21, 2004

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Mike S. Ryu		
Signature		Date	May 21, 2004

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